House District THE TWENTY-TH	IIRD <b>L</b> EGISLATURE	Log No:
Senate District	E LEGISLATURE	Log No:
	GRANTS & SUBSIDIES AI'I REVISED STATUTES	For Legislature's Use Only
,	WINE VIOLES CITATORIES	
Type of Grant or Subsidy Request:		
GRANT REQUEST – OPERATING GRANT	REQUEST – CAPITAL SU	JBSIDY REQUEST
"Grant" means an award of state funds by the legislature, by activities of the recipient and permit the community to benefit		pient, to support the
"Subsidy" means an award of state funds by the legislature, appropriation, to reduce the costs incurred by the organization members of the public.		
"Recipient" means any organization or person receiving a g	rant or subsidy.	
STATE DEPARTMENT OR AGENCY RELATED TO THIS REQUEST		
AND PROGRAM I.D. NO.		
1. APPLICANT INFORMATION:	2. CONTACT PERSON FOR MATTERS	S INVOLVING THIS
Legal Name of Requesting Organization or Individual:	APPLICATION: Name	
Dba:	Title	
Street Address:	Phone #	_
Mailing Address:	Fax #	
	e-mail	
3. Type of business entity:	7. DESCRIPTIVE TITLE OF APPLICA	NT'S REQUEST:
<ul><li>Non profit Corporation</li><li>For profit Corporation</li></ul>		
LIMITED LIABILITY COMPANY Sole Proprietorship/Individual	(Maximum 300 Characters)	
4. Federal tax id #:	8. FISCAL YEARS AND AMOUNT OF S	STATE FUNDS REQUESTED:
5. STATE TAX ID #:  6. SSN (IF AN INDIVIDUAL):	FY 2006-2007 \$	
· · · · · · · · · · · · · · · · · · ·		
l 🚔 🔔	PECIFY THE AMOUNT BY SOURCES OF FITTHE TIME OF THIS REQUEST: STATE \$ FEDERAL \$ COUNTY \$ PRIVATE/OTHER \$	- -
TYPE NAME & TITLE OF AUTHORIZED REPRESENTATIVE:		

NAME & TITLE

DATE SIGNED

AUTHORIZED SIGNATURE

Applicant	

# **Application for Grants and Subsidies**

If any item is not applicable to the request, the applicant should enter "not applicable".

## I. Background and Summary

This section shall clearly and concisely summarize and highlight the contents of the request in such a way as to provide the State Legislature with a broad understanding of the request. Include the following:

- 1. A brief description of the applicant's background;
- 2. The goals and objectives related to the request;
- 3. State the public purpose and need to be served;
- 4. Describe the target population to be served;
- 5. Describe the geographic coverage; and
- 6. Describe how the request will, in the case of a grant, permit the community to benefit from those activities; or for a subsidy, reduce the costs incurred by the organization or individual in providing a service available to some or all members of the public.

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## II. Experience and Capability

## A. Necessary Skills and Experience

The applicant shall demonstrate that it has the necessary skills, abilities, knowledge of, and experience relating to the request. State your experience and appropriateness for providing the service proposed in this application. The applicant shall also provide a listing of verifiable experience of related projects or contracts for the most recent three years that are pertinent to the request.

#### **B.** Quality Assurance and Evaluation

The applicant shall describe its quality assurance and evaluation plans for the request. Specify how the applicant plans to monitor, evaluate and improve their results.

#### C. Facilities

The applicant shall provide a description of its facilities and demonstrate its adequacy in relation to the request. If facilities are not presently available, describe plans to secure facilities. Also describe how the facilities meet ADA requirements, as applicable.

Applicant	

## III. Personnel: Project Organization and Staffing

## A. Proposed Staffing, Staff Qualifications, Supervision and Training

The applicant shall describe the proposed staffing pattern and proposed service capacity appropriate for the viability of the request. The applicant shall provide the qualifications and experience of personnel for the request and shall describe its ability to supervise, train and provide administrative direction relative to the request.

### **B.** Organization Chart

The applicant shall illustrate the position of each staff and line of responsibility/supervision. If the request is part of a large, multi-purpose organization, include an organizational chart that illustrates the placement of this request.

## IV. Service Summary and Outcomes

The Service Summary shall include a detailed discussion of the applicant's approach to the request. The applicant shall clearly and concisely specify the results or outcomes from this request.

- A. Describe the scope of work, tasks and responsibilities.
- B. The applicant shall provide a projected annual timeline for accomplishing the results or outcomes of the service.

Applicant	

## V. Financial

## **Budget**

The applicant shall submit a budget utilizing the enclosed budget forms as applicable, to detail the cost of the request.

#### VI. Other

## A. Litigation

The applicant shall disclose any pending litigation to which they are a party, including the disclosure of any outstanding judgement. If applicable, please explain.

#### **B.** Licensure or Accreditation

Specify any special qualifications, including but not limited to licensure or accreditation that applicant possesses relevant to this request.

# **BUDGET REQUEST BY SOURCE OF FUNDS**

(Period: July 1, 2006 to June 30, 2007)

Applicant:	

CATEGORIES	В	UDGET	Total State			T
(a) (b) (c) (d)  A. PERSONNEL COST  1. Salaries  2. Payroll Taxes & Assessments 3. Fringe Benefits TOTAL PERSONNEL COST  B. OTHER CURRENT EXPENSES 1. Airfare, Inter-Island 2. Insurance 3. Lease/Rental of Equipment 4. Lease/Rental of Space 5. Staff Training 6. Supplies 7. Telecommunication 3. Utilities 9 10 11 12 13 14 15 16 17 18 18 19 20 TOTAL OTHER CURRENT EXPENSES C. EQUIPMENT PURCHASES E. CAPITAL  TOTAL (A+B+C+D+E)  Budget Prepared By:  SOURCES OF FUNDING (a) Total State Funds Requested (b) (c) (d)  Signature of Authorized Official Date		ATEGORIES				
1. Salaries   2. Payroll Taxes & Assessments   3. Fringe Benefits   5.					(c)	(d)
2. Payroll Taxes & Assessments   3. Fringe Benefits   TOTAL PERSONNEL COST	A.	PERSONNEL COST				
3. Fringe Benefits		1. Salaries				
TOTAL PERSONNEL COST  B. OTHER CURRENT EXPENSES 1. Airfare, Inter-Island 2. Insurance 3. Lease/Rental of Equipment 4. Lease/Rental of Space 5. Staff Training 6. Supplies 7. Telecommunication 8. Utilities 9 10 11 12 13 14 15 16 16 17 18 19 20  TOTAL OTHER CURRENT EXPENSES  C. EQUIPMENT PURCHASES D. MOTOR VEHICLE PURCHASES E. CAPITAL  TOTAL (A+B+C+D+E)  Budget Prepared By:  SOURCES OF FUNDING (a) Total State Funds Requested (b) (c) (d)  Name (Please type or print) Phone		2. Payroll Taxes & Assessments				
B. OTHER CURRENT EXPENSES  1. Airfare, Inter-Island 2. Insurance 3. Lease/Rental of Equipment 4. Lease/Rental of Space 5. Staff Training 6. Supplies 7. Telecommunication 8. Utilities 9 10 11 12 13 14 15 16 17 18 19 20  TOTAL OTHER CURRENT EXPENSES C. EQUIPMENT PURCHASES E. CAPITAL  TOTAL (A+B+C+D+E)  Budget Prepared By:  Signature of Authorized Official  Date		3. Fringe Benefits				
1. Airfare, Inter-Island 2. Insurance 3. Lease/Rental of Equipment 4. Lease/Rental of Space 5. Staff Training 6. Supplies 7. Telecommunication 8. Utilities 9 10 11 12 13 14 15 16 17 18 19 20  TOTAL OTHER CURRENT EXPENSES C. EQUIPMENT PURCHASES E. CAPITAL  TOTAL (A+B+C+D+E)  Budget Prepared By:  Budget Prepared By:  Signature of Authorized Official  Date		TOTAL PERSONNEL COST				
2. Insurance   3. Lease/Rental of Equipment   4. Lease/Rental of Space   5. Staff Training   6. Supplies   7. Telecommunication   8. Utilities   9   10   11   12   13   14   15   16   17   18   19   20   17   18   19   20   10   10   10   10   10   10   10	В.	OTHER CURRENT EXPENSES				
3. Lease/Rental of Equipment   4. Lease/Rental of Space   5. Staff Training   6. Supplies   7. Telecommunication   8. Utilities   9   9   10   11   12   13   14   15   16   17   18   19   20   19   19   19   19   19   19   19   1		1. Airfare, Inter-Island				
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6. Supplies 7. Telecommunication 8. Utilities 9 10 11 12 13 14 15 16 17 18 19 20  TOTAL OTHER CURRENT EXPENSES C. EQUIPMENT PURCHASES D. MOTOR VEHICLE PURCHASES E. CAPITAL  TOTAL (A+B+C+D+E)  Budget Prepared By:  SOURCES OF FUNDING (a) Total State Funds Requested (b) (c) (d)  Name (Please type or print) Phone (c) (d)  Signature of Authorized Official Date		4. Lease/Rental of Space				
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8. Utilities 9 10 11 12 13 14 15 16 17 18 19 20  TOTAL OTHER CURRENT EXPENSES  C. EQUIPMENT PURCHASES D. MOTOR VEHICLE PURCHASES E. CAPITAL  TOTAL (A+B+C+D+E)  Budget Prepared By:  SOURCES OF FUNDING (a) Total State Funds Requested (b) (c) (d)  Signature of Authorized Official Date						
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15 16 17 18 19 20  TOTAL OTHER CURRENT EXPENSES  C. EQUIPMENT PURCHASES  D. MOTOR VEHICLE PURCHASES  E. CAPITAL  TOTAL (A+B+C+D+E)  Budget Prepared By:  SOURCES OF FUNDING (a) Total State Funds Requested (b) (c) (d)  Name (Please type or print) Phone						
16 17 18 19 20  TOTAL OTHER CURRENT EXPENSES  C. EQUIPMENT PURCHASES  D. MOTOR VEHICLE PURCHASES  E. CAPITAL  TOTAL (A+B+C+D+E)  Budget Prepared By:  SOURCES OF FUNDING (a) Total State Funds Requested (b) (c) (d)  Name (Please type or print) Phone (c) Signature of Authorized Official Date						
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TOTAL OTHER CURRENT EXPENSES  C. EQUIPMENT PURCHASES  D. MOTOR VEHICLE PURCHASES  E. CAPITAL  TOTAL (A+B+C+D+E)  Budget Prepared By:  SOURCES OF FUNDING  (a) Total State Funds Requested  (b)  (c) (d)  Signature of Authorized Official  Date						+
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D. MOTOR VEHICLE PURCHASES  E. CAPITAL  TOTAL (A+B+C+D+E)  Budget Prepared By:  SOURCES OF FUNDING  (a) Total State Funds Requested  (b) (c) (d)  Name (Please type or print)  Phone Signature of Authorized Official  Date	С					
E. CAPITAL  TOTAL (A+B+C+D+E)  Budget Prepared By:  SOURCES OF FUNDING  (a) Total State Funds Requested (b) (c) (d)  Name (Please type or print)  Phone Signature of Authorized Official  Date						
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TOTAL REVENUE  Name and Title (Please type or print)		(d)		Signature of Authorized	d Official	Date
	то	TAL REVENUE		Name and Title (Please	e type or print)	_

# BUDGET JUSTIFICATION PERSONNEL - SALARIES AND WAGES

Period: July 1, 2006 to June 30, 2007				
POSITION TITLE	FULL TIME EQUIVALENT	ANNUAL SALARY A	% OF TIME BUDGETED TO REQUEST B	TOTAL SALARY BUDGETED IN REQUEST A x B
TOTAL:				

## **BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES**

pplicant:	Period: July 1, 20	106 to June 30, 2007	<i>(</i>		
DESCRIPTION EQUIPMENT		NO. OF	COST PER	TOTAL COST	TOTAL BUDGETED
	TOTAL:				
TIFICATION/COMMENTS:					
STIFICATION/COMMENTS:					
DESCRIPTION		NO. OF VEHICLES	COST PER VEHICLE	TOTAL COST	TOTAL BUDGETED
		NO. OF VEHICLES	COST PER VEHICLE	TOTAL COST	TOTAL BUDGETED
DESCRIPTION					
DESCRIPTION					

# BUDGET JUSTIFICATION CAPITAL PROJECT DETAILS

Applicant:	Period: July 1,	2006 to June 3	30, 2007			
	FUNDING AMOUNT REQUESTED					
TOTAL PROJECT COST		JRCE OF FUNDS PRIOR YEARS	STATE FUNDS REQUESTED		EQUIRED IN ING YEARS	
	FY: 2004-2005	FY: 2005-2006	FY: 2006-2007	FY:2007-2008	FY:2008-2009	
PLANS						
LAND ACQUISITION						
DESIGN						
CONSTRUCTION						
EQUIPMENT						
TOTAL:						
JUSTIFICATION/COMMENTS:						

## DECLARATION STATEMENT APPLICANTS FOR GRANTS AND SUBSIDIES CHAPTER 42F, HAWAI'I REVISED STATUTES

The undersigned authorized representative of the applicant acknowledges that said applicant meets and will comply with all of the following standards for the award of grants and subsidies pursuant to section 42F-103, Hawai'i Revised Statutes:

- (1) Is licensed or accredited, in accordance with federal, state, or county statutes, rules, or ordinances, to conduct the activities or provide the services for which a grant or subsidy is awarded;
- (2) Comply with all applicable federal and state laws prohibiting discrimination against any person on the basis of race, color, national origin, religion, creed, sex, age, sexual orientation, or disability;
- (3) Agree not to use state funds for entertainment or lobbying activities; and
- (4) Allow the state agency to which funds for the grant or subsidy were appropriated for expenditure, legislative committees and their staff, and the auditor full access to their records, reports, files, and other related documents and information for purposes of monitoring, measuring the effectiveness, and assuring the proper expenditure of the grant or subsidy.

In addition, a grant or subsidy may be made to an organization only if the organization:

- (1) Is incorporated under the laws of the State; and
- (2) Has bylaws or policies that describe the manner in which the activities or services for which a grant or subsidy is awarded shall be conducted or provided.

Further, a grant or subsidy may be awarded to a non-profit organization only if the organization:

- (1) Has been determined and designated to be a non-profit organization by the Internal Revenue Service; and
- (2) Has a governing board whose members have no material conflict of interest and serve without compensation.

Further, the undersigned authorized representative certifies that this statement is true and correct to the best of the applicant's knowledge.

(Typed Name of Individual or Organization)	
(Signature)	(Date)
(Typed Name)	(Title)